

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | E.H. | | 08-20-01 |
| O.I.P.E. CLASSIFIER | | 29 | 83101 |
| FORMALITY REVIEW | BE | 897 | 10-25-01 |
| RESPONSE FORMALITY REVIEW | BE | 897 | 01-17-02 |
| | BE | 897 | 03-13-02 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

830
 10/26/01
 809
 01/17
 504/01/15

If more than 150 claims or 10 actions
staple additional sheet here

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